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| PATENT - POWER OF ATTORNEY | | 7,127,415 B1 |
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| OR | Issue Date | October 24, 2006 |
| REVOCATION OF POWER OF ATTORNEY | First Named Inventor | David Verchere |
| WITH A NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS | Title | Method and System For Acquiring Branded Promotional Products |
| | Attorney Docket Number | 164.0002 |
| hereby revoke all previous powers of attorney given | in the above-identified p | atent. |
| A Power of Attorney is submitted herewith. | *************************************** | |
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| | itified above, and to transac acted therewith: our attorney(s) or agent(s) to | et all business in 35987 |
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| on the transact all business in the United State I hereby appoint Practitioner(s) associated with his of attorney(s) or agent(s) with respect to the patent Iden the United States Patent and Trademark Office comments the United States and to transact all business in the United States. | ntified above, and to transact acted therewith: our attorney(s) or agent(s) to es Patent and Trademark (| at all business in 35987 with respect to the patent identified office connected therewith: |

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I am the:
Inventor, having ownership of the patent.

OR

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The address associated with Customar Number:

n Patent owner. Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on

Title and Company | President, Regency Ventures Ltd.

NOTE. Signatures of all the inventors or patent owners of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below".

"Total of ______ forms are submitted.

This collicition of Information is required by 3° CFR 1.31 f.32 and 3.3. The information is required to obtain or retain a beneaft by the public which is to file dand by the SEPTO to processing an application. Conformation by 93 U.S. C. 12 and 7 CFR 1.11 and 1.14. This sciedlend is selected to take 3 movelent to complete, including quitarring, preparing, and submitting the completed application form to the USPTO. Three will vary depending upon the informational case. Any comments on the amount of their jour require to complete the form sandering uppersons for requiring the subreas, whost be sent to the Oriel Information Cfiler Homation Cfiler (I.S. Department of Commerce, P.O. Box 1450, Alexandriu, V.A. 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND FOT. Commissioner for Patterts, P.O. Box 1450, Alexandriu, V.A. 22313-1450.